SCC eFile	2013 ANNUAL RI COMMONWEALTH OF STATE CORPORATION (VIRGINIA		3546764		
1.) CORPORATION NAME:			DUE DATE:	10/31/2013		
H. D. Vest Investment Securit 2.) VA REGISTERED AGENT NAM CORPORATION SERVICE CO Bank of America Center, 16th 1111 East Main Street	ME AND OFFICE ADDRESS: MPANY	ID OFFICE ADDRESS: .NY		SCC ID NO: F1314204 5.) STOCK INFORMATION		
TTTT East Wall Street			CLASS COMMON	AUTHORIZED 900,000		
RICHMOND, VA				000,000		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY						
4.) STATE OR COUNTRY OF INC. TX	ORPORATION:					
6.) PRINCIPAL OFFICE ADDRESS	::					
	STATE HWY 161, STE 400 ACCOUNTING DEPT					
CITY/ST/ZIP: IRVIN	IG, TX 75038					
7.) DIRECTORS AND PRINCIPAL	OFFICERS: All directors may be designed.	and principal gnated as bo	officers must loth a director ar	be listed. An individual an officer.		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROGER C OCHS PRES/SEC 6333 N STATE HWY 161 SUITE 400 IRVING, TX 75038	X OFFIC	CER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOEL BENNETT TREASURER 6333 N STATE HWY 161 SUITE 400 IRVING, TX 75038	X OFFIC	CER	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CASEY GRIFFIN ASST SECRETARY 6333 N STATE HWY 161 SUITE 400 IRVING, TX 75038	X OFFIC	CER	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NEAL HEIFETZ ASST SECRETARY 6333 N STATE HWY 161 SUITE 400 IRVING, TX 75038	X OFFIC	CER	DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFF KLEIN ASST SECRETARY 6333 N STATE HWY 161 SUITE 400 IRVING, TX 75038	X OFFIC	CER	DIRECTOR		

			χ OFFICER	DIRECTOR			
	NAME:	BRIAN A STERN					
	TITLE:	ASST SECRETARY					
	ADDRESS:	6333 N STATE HWY 161					
	CITY/ST/ZIP/CO:	SUITE 400					
	CITT/31/ZIF/CO.	IRVING, TX 75038					
			OFFICER	χ DIRECTOR			
	NAME:	MARSHALL BARTLETT	<u> </u>	<u> </u>			
	TITLE:	DIRECTOR					
	ADDRESS:	500 BOYLSTON ST					
		STE 1640					
	CITY/ST/ZIP/CO:	BOSTON, MA 02116					
			OFFICER	X DIRECTOR			
	NAME:	ANDREW DODSON					
	TITLE:	DIRECTOR					
	ADDRESS:	FOUR EMBARCADERO CENTER	2				
		STE 3610					
	CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
			OFFICER	X DIRECTOR			
	NAME:	BRIAN GOLSON		_^_			
	TITLE:	DIRECTOR					
	ADDRESS:	FOUR EMBARCADERO CENTER	1				
		STE 3610					
	CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94111					
			OFFICER	χ DIRECTOR			
	NAME:	SPENCER P. HOFFMAN		_^_			
	TITLE:	DIRECTOR					
	ADDRESS:	150 N RADNOR CHESTER RD					
		STE A200					
	CITY/ST/ZIP/CO:	RADNOR, PA 19087					
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND							
COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.							
/s/ JOEL BEN	NNETT	JOEL BENNETT, TREASUR	ER	10/8/2013			
	OF DIRECTOR/OFFICER	·		DATE			
LISTE	O IN THIS REPORT	TITLE					
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material							
respect with the intent that the document be delivered to the Commission for filing.							
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